

DEPARTMENT OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Medicaid Purchasing Administration (MPA) 626 8th Ave. S.E. • P.O. Box 45510 Olympia, WA 98504-5510

September 13, 2010

Dear FQHC/RHC Provider

As previously stated in our August 18, 2010 letter, enclosed are the updated data requirements as established by Milliman for use in this analysis.

In order to complete this analysis, each clinic/center must provide:

- Information related to "global fee services" provided to all Healthy Options members during Calendar Year 2009.
 - This includes all encounters that are paid as part of a grouped service. Examples could include pre-natal encounters and surgical follow-up encounters.
 - This should represent all encounters that took place in 2009, regardless of when the global fee was paid.
- Summary of encounters provided to all Healthy Options members by the clinic during Calendar Year 2009, based on clinic data.
 - o This summary should <u>not</u> include encounters included in "global fee services" as described above.

This data must be sent to the department by October 1, 2010 to ensure that the reconciliation is completed within required timelines.

Please note the following additional information regarding this data request:

- "Healthy Options" includes traditional Healthy Options, S-CHIP, Basic Health Plus, S-Med, and WMIP members.
- Encounters should include both PCPs and specialists associated with the clinic.
- The data may be submitted as delimited text files or Excel workbooks.
- The structure of the data files (fields, number of tables) should be exactly as described in the attached data layout.
- The format of each field is not mandated.

As a part of the reconciliation process, each FQHC and RHC will receive data for services provided by that clinic and/or affiliated providers from each MCO. This will allow the clinics to review the data and verify that all clinic encounters can be identified from the data.

With regards to ongoing communication and updates, the department has created a website where you can find the latest updates about the reconciliation process. Here is the link:

http://hrsa.dshs.wa.gov/prorates/Index.html (Click on 2009 FQHC/RHC Reconciliation on the right)

In addition, we will be contacting each clinic/center by phone to address any individual concerns, and we will be having bi-monthly meetings with the Managed Care Organizations including Keith Hearle to stay in touch with the process. If you would like to be included in updates sent via email, please respond with a contact name, e-mail address, and phone number by September 24, 2010 to irina.lusby@dshs.wa.gov.

Should you have questions regarding this matter, please contact Irina Lusby at (360) 725-1882, or by e-mail at <u>irina.lusby@dshs.wa.gov</u>.

Sincerely,

Scott Palafox, Office Chief

Office of Rates Development

Division of Rates and Finance

Enclosures

Cc: Thuy Hua-Ly, Director, Division of Rates and Finance

Global Service Encounter Data	
Details regarding each managed care membe under a global, or grouped, service.	er with one or more encounters that were paid
<u>Field</u>	Description/Notes
- Plan Member ID (or Patient ID)	
- Plan Name	Name of Managed Care plan providing coverage to member
 State PIC (Personal Identification Code) 	
- Procedure Code	Procedure code under which encounter was paid. For example, a surgical follow-up office visit, this field would be the surgical code, not the office visit.
- Initial encounter date	Date of first pre-natal encounter included in total count
- Final encounter date	Date of final pre-natal encounter included in total count
- Total encounter count	Total number of prenatal encounters provided to member during Calendar Year 2009

Encounter	Summary	Table
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Total encounters provided by the clinic, summarized by month and health plan. Includes both PCPs and specialists. Excludes encounters included in the Global Service Encounter Data.

<u>Field</u>	Description/Notes
- Calendar Month	
- Health Plan Name	
- Encounter Count	Total number of medical encounters provided by the clinic

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